

**USA/PCT**

R-10/88

Additional names, addresses and signatures to be attached to Form No. 1000  
 Entitled: **DECLARATION AND POWER OF ATTORNEY**

At **Midland, Michigan 48640 USA**

this 9<sup>th</sup> day of October 19 91

Signature Peter N. Nickias  
 Full Name: **Peter N. Nickias**  
 Residence: **4512 North Saginaw Road, Apt. 1120**  
 City, State, Zip: **Midland, Michigan 48640**  
 Country: **United States of America**  
 Citizenship: **United States of America**  
 P.O. Address: **Same as Residence**

INVENTOR'S DELETED  
 IN FILING

At **Midland, Michigan 48640 USA**

this 10<sup>th</sup> day of October 19 91

Signature Robert K. Rosen  
 Full Name: **Robert K. Rosen**  
 Residence: **2612 Abbott Road #11**  
 City, State, Zip: **Midland, Michigan 48640<sup>2</sup> Lake 10-10-91**  
 Country: **United States of America**  
 Citizenship: **United States of America**  
 P.O. Address: **Same as Residence**

At **Freeport, Texas 77541 USA**

this 15 day of October 19 91

Signature George W. Knight  
 Full Name: **George W. Knight**  
 Residence: **1618 North Road**  
 City, State, Zip: **Lake Jackson, Texas 77566**  
 Country: **United States of America**  
 Citizenship: **United States of America**  
 P.O. Address: **Same as Residence**

INVENTOR'S DELETED  
 IN FILING

At **Freeport, Texas 77541 USA**

this 28 day of October 19 91

Signature Shih-yaw Lai  
 Full Name: **Shih-yaw Lai**  
 Residence: **4523 Bermuda Drive**  
 City, State, Zip: **Sugar Land, Texas 77479**  
 Country: **United States of America**  
 Citizenship: **United States of America**  
 P.O. Address: **Same as Residence**

INVENTOR'S DELETED  
 IN FILING

At

this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_

Signature \_\_\_\_\_  
 Full Name: \_\_\_\_\_  
 Residence: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Citizenship: \_\_\_\_\_  
 P.O. Address: \_\_\_\_\_  
 Employed By: \_\_\_\_\_  
 Of Country: \_\_\_\_\_

At

this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_

Signature \_\_\_\_\_  
 Full Name: \_\_\_\_\_  
 Residence: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Citizenship: \_\_\_\_\_  
 P.O. Address: \_\_\_\_\_  
 Employed By: \_\_\_\_\_  
 Of Country: \_\_\_\_\_

At

this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_

Signature \_\_\_\_\_  
 Full Name: \_\_\_\_\_  
 Residence: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Citizenship: \_\_\_\_\_  
 P.O. Address: \_\_\_\_\_  
 Employed By: \_\_\_\_\_  
 Of Country: \_\_\_\_\_

At

this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_

Signature \_\_\_\_\_  
 Full Name: \_\_\_\_\_  
 Residence: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Citizenship: \_\_\_\_\_  
 P.O. Address: \_\_\_\_\_  
 Employed By: \_\_\_\_\_  
 Of Country: \_\_\_\_\_